File with: lows Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073



IA ETHICS AND MPAIRS DISCLESURE

2009 JAN 14 PM 12: 10

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY RAC

DISCLOSURE	SUMMARY PAGE		
COMMITTEE NAME (Must be same as on Statement of Orga	nization)	7	
MULLINEX FOR SUPERVISOR COMMITTEE	,		FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candid Subdivision Candidate (8) County PAC (9) City PAC (10) School E11) Local Ballot Issue	2)State PAC (3)State Party	(R	DR-2 ev. 07/2007) DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:			mm.#
Candidate Name ANDREW D. MULLINEX	Political Party (If applicable) REPUBLICAN	Sc	anned
Office Sought Black Hawk County Board of Supervisors	District (if Senate or House) Black Hawk		mpulor
Late reports are subject to possible civil and criminal penalties. Pur	suant to lowa Code sections 68B.32A(7) and 68A	401(3), the candidate, for a
1005 Band	319-232-5500		01/14/2000
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED
AM FILING A January 19	DEDORT FOR (4) TO TAKE		
(report date)	REPORT FOR (1) ELECTION /(Indicate by #		LECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED		<u>+ </u>	
			ittees, enter Date of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	overnber bunty & Lou hich Election Black Har	cal Committees, enter County in
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is firs	ish on hand at the end	s	27.82
ADD TOTAL MONEY TAKEN IN THIS PERIOD			· · · · · · · · · · · · · · · · · · ·
Schedule A: Cash Contributions total (Atlach Schedul	e A) ("also see in-kind below)		0.00
Schedule F: Loans Received total (Attach Schedule F			0.00
Schedule H: Total Sales of Campaign Property (Attack			0.00
(Schedule H applies to Candidates' Commi			
	SUB-TOTAL	\$	0.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			0.00
Schedule B: Expenditures total (Attach Schedule B) (*		•••••	0.00
Schedule F: Loan Repayments total (Attach Schedule			
ASH ON HAND at the end of this reporting period (if final repor	t balance must be zero)	\$	27.82
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00
IN KIND CONTRIBUTIONS (From Schedule E - Altach Schedu			0.00
OUTSTANDING LOANS (From Schedule F - Attach Schedule			5.00
ONSULTANT BREAKDOWN (Schedule G Altached?)			YES V NO
ANDIDATE COMMITTEES ONLY:			
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	\$	0.00

R INSTRUCTIONS, SE	st be same as on Statement of Organization)		SCHEDULE	
ıllincx for Supervise	or Committee		(Rev. 02/08)	RECEI & REPA
E: This schedule reports money logned to the committee which is deposited in the committee account. AL UNPAID LOANS FROM <u>LAST</u> REPORTING PERIOD 5		CHECK THIS BO AMENDING FOR		
TI - MONETARY LO (Original source	DANS RECEIVED <u>THIS</u> REPORTING PERIOD of loan, such as a bank, must be shown if a third party is	involved. Include loans from car	ndidate's personal f	unds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicate	AMOUNT C	OF LOAN
		4.	s	
			1	
				-
DATE PAID	OAN REPAYMENTS MADE THIS REPORTING PERIOD IN must be reported on Schedule E — in-kind Contributions. NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	s 0	É PAID
(Loans forgiven	n must be reported on Schedule E - in-kind Contributions.	1	AMOUNT	ŒPAID
DATE PAID	n must be reported on Schedule E — in-kind Contributions. NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT R	ÆPAID
DATE PAID	n must be reported on Schedule E — in-kind Contributions. NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT R	ÆPAID
DATE PAID	n must be reported on Schedule E — in-kind Contributions. NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT R	ÆPAID.
DATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO	AMOUNT R	ÉPAID
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicate the control of the contro	AMOUNT A	